DATA ON NUTRITION COURSES AND ELECTIVES FROM THE REGIONAL NUTRITION CENTER*

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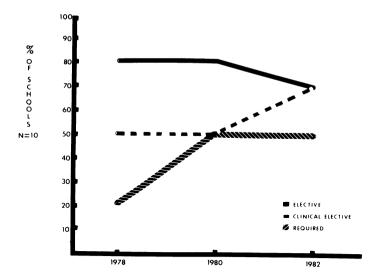
New York. New York

The history, background, and activities of the Regional Nutrition Center have been fully described by Dr. Shils earlier in this conference. During the first year of operation, information was collected on the status of nutrition courses in the medical and osteopathic medical schools in the New York-New Jersey area. This information, plus data collected by the Subcommittee on Nutrition of the Committee on Public Health of the New York Academy of Medicine in the year prior to the inception of the Center, provides the baseline data for evaluation of the status and trends in clinical nutrition education in our consortium.

Although progress has been made in terms of the *number* of nutrition courses, I am not really sure how many more students are influenced by good clinical nutrition teaching than were five years ago. The figure illustrates the fact that as the number of required nutrition courses increased, the number of elective courses decreased, resulting in little net change in the total number of didactic courses. The number of clinical (elective) clerkships in nutrition has risen.

Of the 12 schools participating in the Center's activities, seven schools reported required courses (Table I). Of the seven schools that reported required nutrition courses, two of the courses are actually segments within another required course. Thus, only five institutions have a separate, required nutrition course. These courses vary, from six hours to 23 hours,

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Nutrition courses: Legend N.Y.-N.J. Medical schools, 1978-1982

and also vary in what year they are offered to students. The course listed for school "L" has lost its identity as a distinct segment of a required course; an attempt will be made to integrate nutrition throughout the course lectures. Thus, there are currently only four discrete, required nutrition courses offered in the 12 schools.

Table II refers to didactic or "classroom" elective nutrition courses. I have calculated the percentage of students who take the course, out of the total number of students per class year, at the schools that offer each course. Note that, for students having a nutrition elective available at their own institution, in the academic year 1979–1980 about 10% of the students took a nutrition elective. For 1980–1981 and 1981–1982, the percentage increased to almost 22% and then to 24%. The increase is due solely to a very successful elective course at school "I." If you delete line "I" for those two academic years, there is really no significant change in the number of students taking nutrition electives at the other schools; the percent of students taking nutrition courses hovers at about 11%.

Since the opportunity for extramural electives exists, i.e., students can go to other schools for electives, the percentages for students taking electives in each class year for *all* schools was calculated; approximately 7% of all students per year in New York and New Jersey take a nutrition elective.

(n=12)				en schools e schools		
School	A	В	С	D	Е	L
Hours	23	6*	12	17	22	10*
Year	1st	2nd	2nd	4th	2nd	3rd

TABLE I. REQUIRED NUTRITION LECTURE COURSES

TABLE II. ELECTIVE NUTRITION LECTURE COURSES NO. STUDENTS/YEAR

School	Avg. class*	1979-80	1980-81	1981-82
A*	150	12	16	18
В	110	15/15*	15/15*	13/15*
C	125	15	15	_
D*	200	6	6	10
F	100	15	18	20
H†	75	10	15	25
I	220		130	140
L	150	30	30	30
_	1,130	118(10.4%)	245(21.7%)	271(24%)
All schools	1,605	(7.4%)	(15.2%)	(16.9%)

^{*3}rd/4th year elective †2nd year elective

TABLE III. CLINICAL NUTRITION ELECTIVES: (YEAR 3 OR 4)
NO. STUDENTS/YEAR

School	Avg. class size	19 7 9-80	1980-81	1981-82
A*	150	2	3	3
B*	110	7	7	5
C	125	2	1	2
D	200	4	2	3
E	150	5	7	5
F	100	5	13	10
Subtotal	835	25(2.9%)	33(3.9%)	28(3.3%)
All schools	1,455	25(1.7%)	33(2.3%)	28(1.9%)

^{*}Includes more than one elective

Table III lists *clinical* nutrition electives, i.e., elective clerkships (the segment that rose sharply in the figure). The data speak for themselves. Looking just at schools which have a clinical nutrition clerkship at one of their affiliated hospitals, somewhere between 3 and 4% of those medical

^{*=}segment of required general course

School	Required course Exam	Exam	Elective courses Paper	None
Α	X		X	
В	X		_	X
С	X			X
D	X	X		
Е	X			
F				X
G				
Н		X		
I		X		
J				
K				
L	X			

TABLE IV. METHODS OF STUDENT EVALUATION IN NUTRITION COURSES. 1982—I

students take a nutrition elective. For *all* area schools (again allowing for extramural clerkships), on the average only 1 to 2% of all eligible students in the New York-New Jersey area are actually choosing any formal clinical reinforcement of earlier nutrition teaching.

We also asked our Faculty Advisory Committee to report the types of evaluation used in their nutrition courses (Table IV). Written examination was the sole mode of evaluation in all required courses. There are some differences among elective courses though; some schools use an examination, some courses require a paper or presentation only, and in three schools there was *no* evaluation whatsoever at any point in the elective.

If the data from the three tables are combined, one sees that there are three area schools having no required course, no clinical elective, and no classroom elective. Students at those three schools have to take the initiative to go elsewhere for nutrition training.

The number of nutrition courses, although increased over the last five years, may not be a valid way to evaluate improvement in nutrition teaching to medical students. As indicated above, the total number of students being reached is still only a small percent of the total number of medical students. Over the last three years there has been no significant increase in the number of students who decide to take a nutrition classroom or clinical elective, despite an increase in the number of students exposed to hours of required nutrition teaching, usually in the first or second year. Is this lack of further interest because we haven't been able to prove to students in preclinical or clinical training that nutrition is an integral part of clinical medicine? Is the problem also a question of marketing or of quality of courses? I do not have the answers, but we must try to find the answers before we can state that nutrition teaching in medical schools has really improved.